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				Attorney Docket Numb	er TA	MPPAT-20		
DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION				First Named Inventor	Ma	Matti Kemppainen		
				COMPLETE IF KNOWN				
	(3	7 CFR	1.63)	Application Number 10/597,852				
	Declaration	OR	Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) Required)	Filing Date				
	Submitted with Initial			Group Art Unit				
	Filing			Examiner Name				
As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural Names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
			Method in Reelin	ng Up and a Reel-U	p			

	,		(Title of t	he Invention)	
The spe	cification of wh	ich			
	Is attached h	ereto			
\boxtimes	was filed on	(MM/DD/YYYY)	02/11/2005	as United States Application Number o	r PCT International
Applica	ition Number	PCT/FI2005/050030	and was amended or	n (MM/DD/YYYY)	(if applicable).

amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application	Counting	Foreign Filing Date	Priority	Certified Copy Attached?		
Number(s)	Country	(MM/DD/YYYY)	Not Claimed	YES	NO	
20040217	FI	02/12/2004			\boxtimes	

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	<u>~</u> Y	stomer Numbe Bar Code Lab	50	528	Or		Correspondence address below		
Name:					,				
Address:									
City:	s	State:		_		Zip:			
Country:	Telephone:	ne: Fax:							
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST	INVENTO	R:		A petiti	ion ha	s been file	ed for this unsigned inventor		
Given Name (first and middle [if any]): Matti Family Name or Surname: Kemppainen									
Inventor's Signature	and the second s	or and the second se	*	Date: 16.8.200			Date: 16.8.2006		
Residence: City: Jokela	Sta	ate:		Country	y: Fi i	nland	Citizenship: FI		
Mailing Address: Temmon	kaari 2								
City: Jokela	State:			Zip: F	I-05	400	Country: Finland		
NAME OF SECOND INVENT	OR:			A petiti	ion ha	s been file	ed for this unsigned inventor		
Given Name (first and middle [if any]): Ve		mily Nar Surname		iihelä					
Inventor's Signature	ANT STORY		_			Date: 16 8 2006			
Residence: City: Halkia	Sta	ate:		Country	y: Fi 1	nland	Citizenship: FI		
Mailing Address: Ritarinti	e 31								
City: Halkia	State:			Zip: F]	[-0 <u>7</u> 1	.90	Country: Finland		
Additional inventors are bei	Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.								

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DECLARATION

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ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 1 of 2

Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]): Teppo					Family Name or Surname: Kojo				
Inventor's Signature					Date:				
Residence: City: Mäntsälä State:					Country: Finland Citizenship: FI				
Mailing Address: Alhontie 10									
City: Mäntsälä State:					Country: Finland				
Name of Additional Joint In	ventor, if a	ny:		A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any]): Risto Family Name or Surname: Mäkinen									
Inventor's Fisico Maleina.					Date: 7.8.20				
Residence: City: Mäntsälä State:					Country: Finland	Citizenship: FI			
Mailing Address: Koivik	onkaari	24							
City: Mäntsälä State:					Zip: FI-04600	Country: Finland			
Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]): Ilkka					Family Name or Surname: Naatti				
Inventor's Signature Date: 16.56. 24.46									
Residence: City: Helsinki State:					Country: Finland	Citizenship: FI			
Mailing Address: Napiny	alajant	ie 10 A							
City: Helsinki State:					Zip: FI-00620	Country: Finland			

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PTO/SB/02A (11-00)

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 2 of 2

Name of Additional Joint	Inventor, i	f any:		A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any]):	Marko			Family Name or Surname: Tiilikainen					
Inventor's Signature	Comment of the second				Date: 4.8.2006				
Residence: City: Kelloko	ski	State:	_	Country: Finland	Citizenship: FI				
Mailing Address: Toimelantie 22 C									
City: Kellokoski State:				Zip: FI-04500	Country: Finland				
Name of Additional Joint In	ventor, if a	ny:		A petition has been file	d for this unsigned inventor				
Given Name (first and middle [if any]):									
Inventor's Signature		<u></u>		Date:					
Residence: City: State:				Country:	Citizenship:				
Mailing Address:									
City: State:				Zip:	Country:				
Name of Additional Joint In	ventor, if a	ny:		A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any]):				Family Name or Surname:					
Inventor's Signature Date:									
Residence: City: State:				Country:	Citizenship:				
Mailing Address:									
City:	State:			Zip:	Country:				

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